

Acupuncture & Natural Health

Health Intake Form

Name: _____

Date of Birth: _____

Address: _____

Phone: _____

Other phone: _____

Email: _____

Please check the boxes in front of any symptoms you currently experience, or have experienced in the past 60 days. Bring the completed form with you to your appointment.

I. Liver/Gallbladder (Frustrated--Stagnant)

- Blurry Vision
- "Floaters," "seeing spots," or other visual disturbances
- Dry Eyes
- Cataracts
- Red Eyes
- Migraine headaches
- Stress headaches
- My headaches or migraines improve when I take a vacation
- Headaches that frequently occur at the base of your skull
- Headaches affecting your eyes or temples
- Feeling frustrated
- Feeling angry
- Sensation of having a lump stuck in your throat
- Tend to have a "short fuse" or react angrily to situations
- Feeling full or distended beneath your rib cage
- Pain beneath the ribs, often worse after eating
- Right-sided pain or discomfort
- Nausea after eating fatty foods
- Depression
- Shoulder pain
- Constipation alternating with loose stools
- Have Irritable Bowel, Crohn's or Ulcerative Colitis
- Have a sour or bitter taste in your mouth
- Crave sour or bitter flavors
- Have health issues that worsen in the spring
- Grinding teeth (especially at night) or TMJ Diagnosis
- Brittle nails
- Ridges on your nails
- Inflexible muscles or tight tendons
- Difficulty making decisions/indecisive
- History of gallstones
- Have cold hands and feet, but the rest of me is warm enough
- Have a strong thirst for cold drinks
- Often sigh or make similar sounds when overwhelmed (work, tasks, etc)
- Yawn while talking about things you don't enjoy (even if you are not tired)
- Feeling frustrated with your partner over fertility issues
- Feeling "stuck" in a rut, in one or more areas of your life
- Feel tightly wound (may have trouble sitting still or relaxing)
- Feel cold at night

- Frequently feel warm or flushed
- I rely on caffeine to get me started in the morning

Women:

- Menstrual cramps
- Painful periods
- Ovarian cysts
- Uterine Fibroids
- Heavy menstrual flow
- Clotted blood with menses
- Dark red or maroon blood during period
- PMS
- Breast tenderness or distention before or during menses
- Constipation before menses
- Alternating loose stools and constipation with period
- Menstrual migraines
- Diagnosis of Endometriosis
- Unexplained Infertility
- Infertility due to structural or physical origin
- Difficulty conceiving
- Feel better following your menses

Men:

- Testicular pain after ejaculation
- Low ejaculation volume

II. Spleen/Stomach (Worried/Dampness)

- Bruise easily
- Dislike damp weather and/or humidity
- Crave sweets
- Tend to feel bloated after eating starchy foods
- Tend to feel tired after eating starchy foods
- Feeling muscle weakness
- History of significant blood loss (trauma or childbirth)
- Tend to have loose bowel movements
- Poor appetite
- Weight gain in the past six months
- Have been diagnosed with Type II diabetes or Pre-diabetes
- Frontal headaches that may your head feel full
- Have symptoms that worsen in late summer

- Sensitive to molds (environmental and dietary)
- Sensitive to mildew
- Tendency to have hives or welts (possibly as allergic reactions)
- Diagnosed at some point with Chronic Fatigue Syndrome
- Diagnosed at some point with Fibromyalgia
- Have been diagnosed with Polycystic Ovarian Syndrome (PCOS)
- Have been diagnosed with Pelvic Inflammatory Disease (PID)
- Have a strong thirst for hot or warm drinks
- Prone to yeast infections (or fungal infections)
- Prone to fungal infections (such as athlete's foot, toenail fungus, etc.)
- Feel like you are losing muscle tone (maybe even despite working out)
- Have a history of ear infections
- Have a history of antibiotic use (within the past two years)

Women:

- Often have vaginal discharge other than during ovulation
- Light menstrual flow
- Short menstrual cycle
- Light colored or pale blood during your period
- Feeling tired after your period
- Loose stools with period
- Have been told I have a thin uterine lining

Men:

- Watery semen with ejaculation
- Feel cold after ejaculation

III. Kidney/Urinary Bladder (Anxious)

- Low back pain
- Knee pain
- Joint pain
- Diagnosed with arthritis
- Ringing in the ears
- Poor hearing
- Feel anxious
- Feel afraid
- Have a history of stressful periods in your life
- Do not like making changes in your life
- Decrease in libido
- Poor memory
- Frequently feel cold

- Prefer warmth over cooler temperatures
- Have health problems that worsen in the winter
- Loss of hair
- Dry or brittle hair
- Frequent urination
- History of kidney stones
- Urgent urination
- Awakening at night to urinate
- Have symptoms that worsen in the winter
- Frequently feel cold
- My stress levels are very high
- Many of my health complaints improve when I take a vacation
- My relationship with my spouse or partner causes me stress
- Work is stressful
- Feel warm at night
- Have high blood pressure
- Have a rapid heart rate, heart palpitations or skip heart beats
- Feel exhausted most of the time (rarely feel well-rested)
- Night sweats
- Difficulty sleeping because of night sweats
- I am a "night owl"
- Perspire at night
- Feel hot in my face, chest or hands
- I am a slow starter in the morning
- I am tired frequently

(Kidney pattern continued)

Women:

- Hot flashes

Men:

- Difficulty ejaculating
- Tired or sore back after ejaculating
- Difficulty obtaining or sustaining an erection

Pain & Discomfort:

Please use the following space to explain any pain, discomfort or other painful conditions you want to address during this acupuncture treatment. **Please indicate:**

1. Location of pain
2. Type of pain (burning, stabbing, dull, etc.)
3. When you first noticed this pain
4. Frequency of pain (daily, weekly, monthly, etc.)
5. What makes pain better or worse
6. Intensity of pain (rate 1-7 with 7= most intense)

Please describe your pain in the space below:

Other issues you would like to address:

Continue on the back side of this page if more space is needed >>